

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		15	2/4/01
FORMALITY REVIEW	WM	869	02-27-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
11	5/7
12	8/8
13	01/02
14	02/03
15	✓
16	✓
17	✓
18	✓
19	✓
20	✓
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50	✓

Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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